U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to compty may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U - 2815

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

			1 / 1 / 2004 Through: 12 / 31 / 20)4
3. Name and	d address of person fit	ing.	4. Name, file number, and address of labor organization.	
Name HAI	ROLD	C BURLEY	Name NATIONAL POSTAL MAILHANDLERS UNION - LOC	L 31
			Labor Organization File Number 092-080	
P.O. Box, E	Bldg., Room No., if any	,	P.O. Box, Building and Room Number, if any	
Street 6	75 EVANS STREET	•	Street 675 EVANS STREET	
City AT	LANTA		City ATLANTA	
State Geo	orgia	ZIP Code + 4 20303-2752	Starte Georgia ZIP Code +4 30310	-2752
Position in	n labor organization.	LOCAL TREASURER	The state of the s	
				
Name and	ralue from an employer		r derived income or other economic benefit of tion represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.	
Name and	ralue from an employer	yer whose employees your organizat	7.a. Nature of Interest, Transaction, or Income.	
Name and Name Trade Name P.O. Box, E	ratue from an employer d address of Employer ne, if any:	yer whose employees your organizat	tion represents or is actively seeking to represent.	
Name and Name Trade Name P.O. Box, E Street	ratue from an employer d address of Employer ne, if any:	yer whose employees your organizat	7.a. Nature of Interest, Transaction, or Income.	
Name and Name Trade Name Street City	ratue from an employer d address of Employer ne, if any: Bldg., Room No., if any	ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.	
Name and Name Trade Name Trade Nam P.O. Box, E Street City State	ratue from an employer d address of Employer ne, if any: Bidg., Room No., if any ture and verification.	ZiP Code + 4 Sign The undersigned declares, under penalty of	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount. 7.b. Amount. 7.b. Amount. 7.b. Amount. 7.c. Amount.	he
nonetary v Name and Name Trade Nam P.O. Box, E Street City State	ratue from an employer d address of Employer ne, if any: Bidg., Room No., if any ture and verification.	ZiP Code + 4 Sign The undersigned declares, under penalty of githe information contained in any accompan	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount. 7.b. Amount. 7.b. Amount. 7.b. Amount. 7.c. Amount.	1e

Name of Person Filling HAROLD BURLEY	File Number 0- 702	
B. Heid an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name PJC GROUP		
Trade Name, if any:	a. Labor Organization b. Trust	
P.O. Box, Bidg., Room No., if any SUITE 1525	c. Employer	
Street 55 MARIETTA STREET		
City ATLANTA		
State Georgia ZIP Code + 4 30303		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	PJC GROUP, IS THE CERTIFIED PUBLIC ACCOUNTANTS FOR NPMHU - LOCAL 310	
Trade Name, if any:		
P.O. Box, Bldg., Room No., If any		
Street	11.b. Approximate dollar value of such dealing. \$250,000	
City	12.a. Nature of interest held or income received.	
State ZIP Code + 4	MARCH 12, 2004, RECEIVED LUNCH AT RUTH CHRIS STEAKHOUSE. (NOT SURE OF THE EXACT AMOUNT) BEST ESTIMATE \$ 100.00	
	12.b. Amount. \$100	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money		
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

Name of Person Fining HAROLD BURLEY		HO IVAILUO G- O-O	<u> </u>	
B. Held an interest in or derived income or economic benefit with monetary valuable substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active. (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization. 8. Name and address of Business (including trade name, if any). Name PJC GROUP Trade Name, if any:	vise dealing with the business rely seeking to represent, or irectly to, or otherwise	m		
P.O. Box, Bidg., Room No., if any SUITE 1525 Street 55 MARIETTA STREET	c. Employer			
City ATLANTA				
State Georgia ZIP Code + 4 30303				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing].		
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	PJC GROUP, IS THE CONTROL OF THE CON	ERTIFIED PUBLIC	ACCOUNTANTS I	OR
Street	11.b. Approximate dollar value	of such dealing	\$250	0,000
City	12.a. Nature of interest held		<u> </u>	7000
State ZIP Code + 4	APRIL 29,2004 RECE RESTAURANT. (NOT SU ESTIMATE \$ 75.00	IVED LUNCH AT MA		A STATE OF THE STA
	·			
	12.b. Amount.		Agenes -	\$75
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above)		Agenes -	\$75
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant	er parts A and B above)		Apres -	\$75
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	r parts A and B above) or other thing of value.		Apres -	\$75
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant	r parts A and B above) or other thing of value.		Apres -	\$75
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	r parts A and B above) or other thing of value.		Apres -	\$75
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	r parts A and B above) or other thing of value.		Apres -	\$75
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any:	r parts A and B above) or other thing of value.		Apres -	\$75
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	r parts A and B above) or other thing of value.			\$75
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	r parts A and B above) or other thing of value.			\$75

Name of Person Pilling HAROLD BURLEY	FRE NUMBER OF 67 07 5	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
Name and address of Business (including trade name, if any).	9. Business deals with:	
Name PJC GROUP		
Trade Name, if any:	a. Labor Organization b. Trust	
P.O. Box, Bidg., Room No., if any SUITE 1525	c. Employer	
Street 55 MARIETTA STREET		
City ATLANTA		
State Georgia ZIP Code + 4 30303		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	PJC GROUP, IS THE CERTIFIED PUBLIC ACCOUNTANTS FOR NPMHU - LOCAL 310	
Trade Name, if any:		
' P.O. Box, Bidg., Room No., if any		
Street	11.b. Approximate dollar value of such dealing. \$250,000	
City	12.a. Nature of interest held or income received.	
State ZIP Code + 4	JUNE 28, 2004 RECEIVED DINNER AT CAPTAIN JOES RESTAURANT. (NOT SURE OF THE EXACT AMOUNT) BEST ESTIMATE \$ 26.00	
	12.b. Amount. 4 200 - \$26	
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		
Trade Name, if any:		
P.O. Box, Bidg., Room No., if any		
Street		
City		
State ZIP Code + 4		

Name of Person Filing HAROLD BURLEY	File Number U- 28/5		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
Name and address of Business (including trade name, if any).	9. Business deals with:		
Name FIRST HEALTH Trade Name, if any:	a. Labor Organization b. Trust		
P.O. Box, Bldg., Room No., if any Street 3200 HIGHLAND AVENUE	c. Employer		
City DOWNERS GROVE State Illinois ZIP Code + 4 60515			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name	FIRST HEALTH ADMINISTERS THE UNION SPONSORED HEALTH PLAN.		
Trade Name, if any:			
P.O. Box, Bidg., Room No., if any Street			
City	11.b. Approximate dollar value of such dealing.		
State ZIP Code + 4	12.a. Nature of interest held or income received. AUGUST 22 THRU 28, 2004, SIX BUFFET DINNERS (NOT SURE OF THE EXACT AMOUNT), AND DUFFLE BAG. BEST ESTIMATE 270.00		
	12.b. Amount.		
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bidg., Room No., if any			
Street			
State ZIP Code + 4			
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.		

Form LM-30 (2003)

Name of Person Fining HAROLD BURLEY	110.00.00 000	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
Name and address of Business (including trade name, if any).	9. Business deals with:	
Name PJC GROUP		
Trade Name, if any:	a. Labor Organization b. Trust	
P.O. Box, Bidg., Room No., if any SUITE 1525	c. Employer	
Street 55 MARIETTA STREET		
City ATLANTA		
State Georgia ZIP Code + 4 30303		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	PJC GROUP, IS THE CERTIFIED PUBLIC ACCOUNTANTS FOR NPMHU - LOCAL 310	
Trade Name, if any:		
P.O. Box, Bidg., Room No., if any		
Street		
City	Approximate dollar value of such dealing. \$250, 000 Approximate dollar value of such dealing. \$250, 000 Approximate dollar value of such dealing.	
State ZIP Code + 4	NOVEMBER 3, 2004 RECEIVED DINNER AT GEORGIA BROWN RESTAURANT. (NOT SURE OF THE EXACT AMOUNT) BEST ESTIMATE \$ 45.00	
	12.b. Amount.	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money		
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

Name of Person Paring HAROLD BURLEY	FRE NUTICE C- 2010
B. Held an interest in or derived income or economic benefit with monetary values substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actifully any part of which consists of buying from or selling or leasing directly or incidealing with your labor organization or with a trust in which your labor organization. 8. Name and address of Business (including trade name, if any). Name PJC GROUP	wise dealing with the business vely seaking to represent, or lirectly to, or otherwise
Trade Name, if any:	b. Trust
P.O. Box, Bidg., Room No., if any SUITE 1525	c. Employer
Street 55 MARIETTA STREET City ATLANTA	
State Georgia ZIP Code + 4 30303	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Trade Name, if any: P.O. Box, Bidg., Room No., if any	PJC GROUP, IS THE CERTIFIED PUBLIC ACCOUNTANTS FOR NPMHU - LOCAL 310
Street	11.b. Approximate dollar value of such dealing. \$250,000
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	NOVEMBER 4, 2004 RECEIVED DINNER AT PIER 7 RESTAURANT. (NOT SURE OF THE EXACT AMOUNT) BEST ESTIMATE \$ 40.00
	12.b. Amount.
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any	
Street	
State ZIP Code + 4	
	14.b. Amount of payment.
13.b. Is the Business an Employer or Consultant ?	17.0. Allockt of payment

Form LM-30 (2003)